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Annual Report

OF THE

Medical Officer of Health

FOR THE

Arnold Urban District,

FOR THE YEAR 1914,

TOGETHER WITH THE

REPORT

OF THE

SANITARY INSPECTOR.

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NOTTINGHAM:  
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1915.



# Arnold Urban District Council.

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ANNUAL REPORT  
OF THE  
**Medical Officer of Health**  
FOR THE  
**ARNOLD URBAN DISTRICT,**  
**FOR THE YEAR 1914,**  
TOGETHER WITH THE  
**Report of the Sanitary Inspector.**

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ARNOLD, MARCH, 1915.

TO THE ARNOLD URBAN DISTRICT COUNCIL.

GENTLEMEN,

I beg to present my eighteenth Annual Report.

It deals, as usual, with the vital statistics and the sanitary condition of the District. These Annual Reports vary only in detail; they are really the *resumé* of the reports sent to you month by month, and it is difficult in a small District like this to find much information which is not already known to the Members of your Council, but it must be remembered that these reports are also for the information of the Local Government Board and the County Council.

It has been a comparatively uneventful year for Arnold from a sanitary point of view. The possession of an excellent water supply and an efficient system of sewerage exempt us from many of the dangers to which some other places are liable, and we have, further, the advantages of a naturally healthy site—previous sandstone covered with a layer of sand.

The year 1911 came in with mild weather and without those extremes of temperature which we often get in this country, consequently there was very little illness due to climatic conditions, though the death rate was high during January. In February, however, respiratory diseases were very prevalent and there was a great deal of illness in the district, and again a high death rate; for the next three months there was much less sickness and a corresponding lowering of the death rate, which in May was only 7·68, though during this period there was an outbreak of Influenza, which, however, was of a mild character. During the summer months the weather was dry and hot, and there was very little illness, and low death rates were the rule. The latter end of the year was characterised by extremely mild weather and the absence of serious illness, the death rate in December being only 7·74. So much for the general course of events during the year. I will now ask you to consider the details.

## VITAL STATISTICS.

I.—*Population*.—For the first time I have to report a decrease of 85 on the previous year. I must own I was not prepared for this. I did not think we had increased very much, but I did not fancy there would be an actual loss. However, judging from previous calculations and the actual numbers given at the last census, I think my figures are approximately correct. I am much indebted to Mr. Askew, one of the rate collectors, for his information as regards the inhabited houses: at the end of June they were 2,612, and this, multiplied by the number of inhabitants per house, 4·5, as given at the last census, gives a population of 11,754 compared with 11,839 in 1913. Of course, the population of a working class district does vary considerably from year to year, due to local conditions of trade and employment, and in trying to solve the reason of the decrease in our District I have come to the conclusion that probably it is due to the fact that a good many men left Gedling Colliery for various reasons and went to other collieries outside the District; so far as I know there was no other reason, as employment up till June at any rate was quite at a normal standard.

It should be remembered that the estimation of the population is of very considerable importance, for on it all the chief statistics are based, if too high the results are too flattering, and if too low the reverse, and that is why I have often remarked that a quinquennial census would be better.

II.—*Deaths*.—There were 146 deaths registered in the District during the year—69 males and 77 females—resulting in a death rate of 12·42 per 1,000. This is the gross rate, and the transferable deaths have to be taken into consideration. Transferable deaths are the deaths of persons who, having a fixed or usual residence in England or Wales, die in a district other than that in which they usually lived. The nett deaths are obtained by subtracting the number of deaths of persons dying in the district, but who usually lived outside, and by adding the number of deaths of residents who have died elsewhere. The first of these classes is obtained by the Medical Officer of Health from the returns made to him by the local Registrar, the second through the County Medical Officer, who has the returns sent to him by the Registrar-General, and he in turn distributes them to the different districts.

I have received particulars of 10 deaths—eight males and two females—from the County Medical Officer, which have to be added to those registered in the district, and there are none to deduct, so the nett deaths are 156—77 males and 79 females—and the nett death rate 13·27.

The standardised, or further corrected death rate, which would have been recorded had the sex and age constitution of the population been identical with that of England and Wales as enumerated in 1911, is 13·58.

The transferable deaths occurred as follows:—

7	in the General Hospital.
1	„ Samaritan Hospital.
1	„ Basford Workhouse.
1	„ Notts. County Asylum.

It may be interesting to quote the deaths and death rates for the months:—

DEATHS.				DEATH RATE.		
January	...	...	22	...	...	18·66
February	...	...	19	...	...	18·66
March	...	...	16	...	...	14·05
April	...	...	11	...	...	10·98
May	...	...	10	...	...	7·68
June	...	...	13	...	...	12·29

DEATHS.				DEATH RATE.		
July ...	...	...	10	...	...	8.78
August ...	...	...	9	...	...	10.61
September ...	...	...	17	...	...	13.17
October ...	...	...	7	...	...	7.74
November ...	...	...	10	...	...	15.04
December ...	...	...	12	...	...	7.74

The following is the table of deaths and death rates for the previous ten years:—

DEATHS.				DEATH RATE.	
1913	...	154	...	13.0	
1912	...	132	...	11.33	
1911	...	131	...	11.68	
1910	...	134	...	12.23	
1909	...	169	...	15.71	
1908	...	173	...	16.28	
1907	...	132	...	12.67	
1906	...	140	...	13.68	
1905	...	162	...	15.38	
1904	...	143	...	14.40	

This table represents an average of 147 deaths, and a death rate of 13.63.

The Registrar-General's return for 1914 is:—

				CRUDE.	STANDARDIZED.
England and Wales ...	...	...	...	13.9	13.6
97 great towns	...	...	...	14.6	14.9
145 smaller towns	...	...	...	12.8	12.9
England and Wales less the 242 towns	...	...	...	13.3	12.2
London...	...	...	...	14.4	14.4

Of the 156 deaths:—

36	were under 1 year of age.	
4	were between 1—2 years of age.	
7	„ 2—5 „	
6	„ 5—15 „	
6	„ 15—25 „	
26	„ 25—45 „	
30	„ 45—65 „	
41	were over 65 „	



The diseases causing the chief mortality were:—

Bronchitis	...	...	...	26
Pulmonary Tuberculosis	...	...	...	14
Cancer	...	...	...	12
Heart Disease	...	...	...	12
Premature Birth, etc.	...	...	...	11
Diarrhœa	...	...	...	9
Pneumonia	...	...	...	8

Four inquests were held.

### Age Mortality.

Table III shows the ages at which the deaths occurred, and also the causes of death classified and arranged. The following is the percentage of deaths at different ages:—

Under 1 year	...	36 deaths	...	23·07 per cent.
Between 1—5 years	11	„	...	7·05 „
„ 5—15	„	6	„	3·84 „
„ 15—45	„	32	„	20·51 „
„ 45—65	„	30	„	19·23 „
Over 65	„	41	„	26·28 „

### Seasonal Mortality.

57 deaths occurred in the 1st quarter, or 36·53 per cent.

34	„	„	2nd	„	21·79 „
36	„	„	3rd	„	23·07 „
29	„	„	4th	„	18·58 „

### Infant Mortality.

There were 36 deaths of Infants under 12 months of age, which means a death rate of 124 per 1,000 births.

The causes of these deaths were:—

Bronchitis	...	...	...	8
Diarrhœa	...	...	...	8
Premature Birth	...	...	...	6
Marasmus	...	...	...	5
Tuberculous Meningitis	...	...	...	2
Pneumonia	...	...	...	2
Measles	...	...	...	1
Syphilis	...	...	...	1
Unclassified	...	...	...	3

The following, from the County Medical Officer's Report for 1913, is an interesting table of the infantile death rates of surrounding districts for that year:—

Huthwaite	...	...	...	139
Warsop	...	...	...	138
Mansfield	...	...	...	127
Hucknall Torkard	...	...	...	121
Kirkby-in-Ashfield	...	...	...	120
Arnold	...	...	...	111
Eastwood	...	...	...	106
Worksop	...	...	...	105
Beeston	...	...	...	102
Sutton-in-Ashfield	...	...	...	98
Carlton	...	...	...	93
West Bridgford	...	...	...	65

Mean of Urban Districts, 110.

The Registrar-General's Return for 1914 is:—

England and Wales	...	...	105
97 great towns	...	...	113
145 smaller towns	...	...	104
England and Wales, less the 242 towns	...	...	93
London	...	...	103

The infant mortality rate is higher than it has been for the last two years, though it is an improvement on the average of the last ten years, the figures for which are:—

1913	...	...	111	1908	...	...	171
1912	...	...	89	1907	...	...	148
1911	...	...	138	1906	...	...	124
1910	...	...	138	1905	...	...	161
1909	...	...	159	1904	...	...	200

There was the rather large proportion of eight deaths from Bronchitis, and a similar number from Diarrhœa, which, in spite of the hot dry weather during the summer months, was not so much in evidence as in previous years.

I have many times remarked on the causes of a high infant mortality, it depends on several conditions and varies to a certain extent according to the season, and is influenced by local conditions. It is very generally thought that a high birth rate necessarily means a high infant

mortality, but this is not so ; nor does the reverse hold good that a low birth rate is associated with a low mortality rate. France, for instance, has a very low birth rate, but a very high rate of infant mortality. I think it can be taken as proved that infant mortality has no connection with any natural or unpreventable causes, and that we must look elsewhere for the reason of this preventable loss of life. It is a fact that rural districts suffer less than urban, this is probably due to the healthier surroundings in which the mothers and infants live, and that the mothers do not work in factories whilst they are pregnant, as this is undoubtedly bad both for mother and child, at any rate during the last few months of pregnancy. In urban districts, too, mothers frequently return to work as soon as possible after the birth of the child, and consequently the child has to be weaned and left to the care of a neighbour. It is not, however, to be supposed that it is only a question of town life as compared with country, it is certain that density of population and conditions of female labour in towns are prejudicial to infant life, but, in certain places, where these conditions prevail and where means have been adopted to combat the high infant mortality rate, it has been appreciably decreased.

The solution of this important and difficult problem consists in the teaching of the mothers how to look after their own health and how to feed and clothe their children properly. These ideas are aptly expressed in an article which appeared in the "Times" some years ago, and which I take the liberty of quoting :—"The unnatural concurrence of an increasing infant mortality, with a falling birth rate, which so seriously threatens the national vitality, finds its true explanation neither in external circumstances nor in the employment of women, but in the habits of the people. Throughout the scale, from mere thoughtlessness to actual murder, the same elements are seen to be at work, and to tend, in varying degrees, towards repudiation of the duties of life and their subordination to ease, comfort, pleasure and self indulgence. The plan adopted by some towns of appointing lady inspectors to pay nursing visits is excellent. The results appear to be most encouraging. The mothers are said to welcome the attention and the help, and most of them are found teachable not only in regard to the details of feeding and nursing, ignorance and neglect of which are the great immediate causes of death, but also in regard to the whole maternal duty. The sense of responsibility is awakened in them, no doubt by the sympathetic interest taken in their affairs by the Visitor. The remedy is not complete, but it is real, and so far as it goes, it touches the root of the matter."

The Local Government Board have in recent years devoted considerable attention to questions connected with infant welfare, and in July last they issued a circular to all Sanitary Authorities explaining in detail how the work could be carried on to the best advantage. The Board call special attention to the fact that Local Authorities have up to the present concerned themselves especially with the child in its first year of life, but they consider that the scheme should be extended so that the child is under supervision till school age. The chief items in the scheme proposed by the Board were :—

- (1) An ante-natal clinic for expectant mothers.
- (2) The home visiting of expectant mothers.
- (3) The provision of systematic advice and treatment for infants at a baby clinic or infant dispensary.
- (4) The continuance of these clinics and dispensaries, so as to be available for children up to the age when they go to school.
- (5) The systematic home visiting of infants and of children not on a school register.

We have now had a Health Visitor for over three years, during which time the infant mortality rate has been 89, 111, and 124, the last of which figures is exactly the lowest in all the reports of the last twenty-five years, so I think we can draw the conclusion that our infant mortality rate *has* been considerably reduced by the employment of a Health Visitor.

We were unfortunately without a Health Visitor for six weeks during the year, during which time the infant clinics were carried on by the voluntary lady helpers.

Miss Falconer commenced her duties on October 28th, and, though somewhat inexperienced in this special work, she has appeared to grasp the situation and has made an excellent start, and has succeeded in making herself popular. I consider she is doing very good work.

In November a Medical Inspector was sent by the Board of Education, who made an exhaustive enquiry into the method of the working of the Arnold Infant Welfare Association and attended one of the Thursday afternoon clinics.

Dr. Lilian Wilson expressed herself as being pleased with the work, but hoped that it would be extended as much as possible: a monetary grant has since been received from the Board.

During 1914 the total number of attendances at the Thursday afternoon consultations was 688. There were 91 fresh cases, which with 45 already on the books made a total of 136 babies, who were weighed, &c., and about whom advice was given. Miss Falconer gives also a series of short talks on Health, Hygiene and Infant Feeding on these afternoons. There has lately been started a class on Wednesdays for the instruction of mothers in the cutting out and making of infants' clothes, which should be highly beneficial from an hygienic point of view, besides being economical.

The Health Visitor's statistical report is as follows :—

First visits on notification	...	251
Re-visits during 1st year of life	...	1552

The method of feeding adopted :—

Wholly breast fed	...	...	139
Partly breast, partly artificial	...	...	71
Wholly artificially fed	...	...	39

III.—*Births*.—293 were registered during the year—162 males and 131 females: there were no transferable births, the nett birth rate is therefore 24·92 of the estimated population.

The following is the Registrar-General's return for 1914 :—

England and Wales	...	...	...	23·6
97 great towns	...	...	...	24·9
145 smaller towns	...	...	...	23·6
England and Wales less the 242 towns	...	...	...	21·9
London	...	...	...	24·6

The birth rate is still low and it will be seen that a low birth rate is general throughout the country. To show how the birth rate has been steadily dropping in this district during the past few years I quote the following figures :—

1905	...	...	29·43	1910	...	...	25·1
1906	...	...	30·58	1911	...	...	25·69
1907	...	...	29·66	1912	...	...	24·81
1908	...	...	31·25	1913	...	...	23·48
1909	...	...	29·75	1914	...	...	24·92

I gave some possible explanations of the cause of the falling birth rate in my last report, to which I refer anyone interested in this subject. Under the Notification of Births Act 280 births have been notified to me, occasionally I hear of a birth which has not been officially notified, but on the whole the regulations have been well complied with by the medical men and midwives in the district.

There were 14 illegitimate births, or a proportion of 47·7 per 1,000 births. There were four deaths, which means a mortality amongst the illegitimate children of 285 per 1,000 births compared with 114 for the legitimate.

IV.—*Infectious Diseases*.—There were 238 cases notified during the year. The numbers for the previous five years were 148, 73, 71, 51, 31. The attack rate per 1,000 of the population is 20·2.

The following were the diseases:—

Scarlet Fever	...	...	...	205
Pulmonary Tuberculosis	...	...	...	14
Diphtheria	...	...	...	7
Erysipelas	...	...	...	7
Other forms of Tuberculosis	...	...	...	2
Enteric Fever	...	...	...	1
Puerperal Fever	...	...	...	1
Ophthalmia Neonatorum	...	...	...	1

The monthly distribution was as follows:—

January	...	15 cases	July	...	19 cases
February	...	16 „	August	...	22 „
March	...	6 „	September	...	17 „
April	...	31 „	October	...	22 „
May	...	33 „	November	...	15 „
June	...	17 „	December	...	8 „

Table II shows the ages at which they occurred.

There were 22 deaths, viz.:—

Enteric Fever	...	...	...	1
Measles	...	...	...	3
Scarlet Fever	...	...	...	4
Pulmonary Tuberculosis	...	...	...	14

This represents a death rate of 1·87 per 1,000 of the population.



## Notifiable Infectious Diseases.

I.—*Enteric Fever or Typhoid Fever*.—It is satisfactory that only one case of this disease was notified, though unfortunately it ended fatally. Enquiries were made, but no cause could be ascertained for it. The patient was nursed at home and no secondary cases occurred.

II.—*Diphtheria*.—Seven cases were notified as compared with 47 during the previous year. The cases occurred during the early part of the year and were a part of the epidemic prevailing in 1913. There were no deaths from this cause, although two would most assuredly have died had tracheotomy not been performed: the attack rate per 1,000 of the population was 59.

The following table gives the number of cases and deaths during the last few years:—

	Cases.	Deaths.	Fatality per cent.
1905 ...	1	1	100·
1906 ...	8	2	25·
1907 ...	12	1	8·3
1908 ...	12	5	41·7
1909 ...	3	0	0·
1910 ...	13	0	0·
1911 ...	32	4	12·5
1912 ...	24	3	12·5
1913 ...	47	11	23·4
1914 ...	7	0	0·

III —*Scarlet Fever*.—No less than 205 cases of this disease were notified during the year, this is the largest number I have ever had to report. It will be remembered that Scarlet Fever was epidemic throughout the year 1913, so that for two whole years the disease has been present in the district. The attack rate per 1,000 of the population was 17·44, and the case fatality 1·9 per cent. The type of the disease was of a mild character as in the preceding year, and it is this fact partly which makes it so difficult to prevent the spread of the disease, for many cases go through the whole illness without calling in a doctor, and no steps are taken to prevent the disease spreading to others. Indeed, cases are so mild sometimes that the child is not really ill at all, there being only a little indisposition for a day or two, and as the patient is not ill enough to be kept in bed the rash is never noticed, and no advice is sought till probably peeling is noticed on the hands, by then of course the child may have imparted the disease to many others. I have had

several cases of this description, in which I believe that the parents honestly did not know there was anything the matter, of course there are others who wilfully conceal the fact, but this it is not easy to prove. Two of the cases were sent to the Basford Sanatorium.

IV.—*Erysipelas*.—There were seven cases notified, but they call for no special remark.

V.—*Puerperal Fever* —The one case notified ended fatally. This is the first case in the District since 1908, it occurred in the practice of a midwife, who was suspended from doing other work so long as she was in attendance, and until her clothes had been disinfected.

There is still a scarcity of midwives in the district, as a matter of fact during the suspension of this midwife there were practically none at all, as the only other one who did much work was ill and has since died. Another has recently come and is beginning to do a fair amount of work. There are two or three quite reliable monthly nurses, but they of course are not allowed to take cases by themselves.

VI.—*Small Pox* —There were no cases during the year. In previous reports I have commented somewhat freely on this disease and its prevention—vaccination and re-vaccination—and I again make my annual protest against the neglect of this simple and harmless remedy.

VII.—*Tuberculosis*.—There were 14 notifications of Pulmonary Tuberculosis and five of the disease in other organs of the body. Of these 14 cases five have since died, and the total number of deaths from Pulmonary Tuberculosis during the year were 14, giving a death rate of 1·19 per 1,000 of the population.

The following table gives the death rates for the preceding ten years, showing an average of ·83 :—

1904	...	...	·90
1905	...	...	1·23
1906	...	...	·68
1907	...	...	1·15
1908	...	...	1·31
1909	...	...	·92
1910	...	...	·91
1911	...	...	·35
1912	...	...	·25
1913	...	.	·67



The death rate from other Tuberculous Diseases is  $\cdot 42$  per 1,000, and from *all* Tuberculous Diseases 1.61.

The loss of life from Tuberculosis is indeed great throughout the country, and of late years the Local Government Board have been waging a vigorous campaign against this disease, both from a preventative and curative point of view. The Housing and Factory and Workshops Acts have one great aim in view, viz.,—the improvement in the surroundings of the people and the conditions under which they work. Professor Kock, an eminent authority on this subject, has said: “It is the overcrowded dwellings of the poor that we have to regard as the true breeding places of Tuberculosis: it is out of them that the disease always crops up anew, and it is to the abolition of these conditions that we must, first and foremost, direct our attention, if we wish to attack the evil at its roots and to wage war against it with effective weapons.”

Prevention is better than cure, especially so in Tuberculosis, for though a considerable number of cases apparently get well, yet a large proportion relapse in the course of time and eventually die, and, in my opinion, it is the prevention of the disease that should engage chiefly the attention of the authorities.

The chief preventative measures are:—

- (1) The prevention of overcrowding.
- (2) Improved housing conditions and sanitary arrangements generally.
- (3) Abundance of fresh air day and night.
- (4) The prevention of the sale of milk from Tuberculous cows.
- (5) The prevention of spitting in public places.
- (6) The destruction by fire of the sputum from a consumptive patient.
- (7) The education of the people in general “fresh air principles” and in inducing them to lead healthy and abstemious lives.

VIII.—*Ophthalmia Neonatorum*.—The Local Government Board issued an order making this disease notifiable throughout England and Wales from April 1st. Hitherto it has been notifiable only in areas whose sanitary authorities have obtained special permission to include it in the schedule of notifiable diseases. The order defines *Ophthalmia*

Neonatorum as a purulent discharge from the eyes of an infant commencing within twenty-one days of birth. Every case is notifiable by a medical man unless previously notified by a certified midwife in attendance. The notification is on a special form provided by the Local Authority. One case was notified.

### Non=Notifiable Infectious Diseases.

IX.—*Measles*.—There has been no wide-spread epidemic of this complaint during the year, although I suggested that the Infants' Department of the Calverton Road School should be closed for a fortnight from June 29th, as there were a few cases amongst the children there. The closing of an Infants' School is sometimes quite sufficient to check the spread of Measles, as the disease chiefly affects young children, and it should always be done early, as the mortality is very great. It appears to have been quite successful in this instance as there were no further cases.

X.—*Whooping Cough*.—A few cases occurred during the last two months of the year, and the Sherwood Lodge School was closed by the Education Authorities on account of the depletion in the attendance of the children, due partly to Whooping Cough and partly to Chicken Pox. It is a very infectious disease especially in the early stages and before the disease can be definitely diagnosed: it is well for the teachers to be on the look-out and to exclude children from school suffering from a cough, during epidemic time, even though there be no characteristic whoop.

I regret that at the time of writing this report Whooping Cough is epidemic throughout the district.

XI.—*Diarrhoea*.—The warm dry summer favoured the onset and spread of this disease, and nine deaths have been recorded from it, eight of them being in children under twelve months of age. The infection is usually conveyed to infants' food by contaminated dust or flies, and hence the prevention of the disease consists mainly in—

- (1) Scrupulous care and cleanliness as regards food.
- (2) An efficient system of scavenging.
- (3) The abolition of the privy midden system.
- (4) The paving of yards around houses.

XII.—*Influenza* has not been epidemic, though there have been occasional cases here and there during the year. As in previous years

it was of a mild character, though there was one death due to a heart complication.

*Glanders*.—A case of this disease occurred in a stableman, who worked at Gedling Colliery where some forty horses were attacked. It is a rare disease and is most commonly met with in the horse, in human beings it is usually found in men who have been tending a diseased animal, and there is no doubt that man becomes infected from the horse. The disease spreads rapidly and is very fatal.

## Cancer.

There were 12 deaths from Cancer. The figures for the previous ten years are 9, 8, 15, 18, 10, 7, 6, 7, 8, 5. The Cancer Research Fund is still continuing its labours, and though no cure has yet been found, it has been doing exceedingly useful work.

It has been able to demonstrate fairly conclusively that Cancer is not infectious, and that the so-called "Cancer houses" and "Cancer areas" are a myth. The public have of late years become very alarmed about this point, and investigations have taken place of the supposed infectivity of the disease. There is no positive evidence of infection of any kind whatsoever. Of course a number of cases of Cancer do occur in a village, a street, a house or even a family without the numbers necessarily meaning anything more than what would be expected according to the theories of probabilities. Collections of cases of Cancer, to have any significance at all, must occur with a frequency which remove them from all possibility of their being merely what would be expected owing to the frequency of the disease.

The public generally have wondered why the problem of the causation and cure of Cancer has not been solved by clinical observation, all that need be said on that point is this, that clinical observation has been dealing with this matter for hundreds of years, and has practically not advanced our knowledge to any appreciable extent. It is quite certain that the only methods likely to prove successful would be by the methods adopted by the Cancer Research Fund—experimental investigation and research.

## Notification of Infectious Diseases.

I have received 238 notifications during the year. Tabulated and compared with the previous 10 years, they are as follows :—

		1914	1913	1912	1911	1910	1909	1908	1907	1906	1905
Small Pox	...	0	0	0	0	0	0	0	0	0	0
Diphtheria	...	7	47	24	32	12	3	12	12	8	1
Erysipelas	...	7	1	3	0	1	1	1	2	2	3
Scarlet Fever	...	205	90	27	25	38	26	7	11	50	7
Enteric Fever	...	1	1	2	4	0	1	3	16	2	5
Puerperal Fever	...	1	0	0	0	0	0	2	0	0	0
Pulmonary Tuberculosis	14	5	17	4	Notification not in force.						
Other forms of	„ ...	2	4				„		„		
Ophthalmia Neonatorum	1						„		„		

The following are the chief methods adopted to check the spread of infectious diseases:—

- (1) Printed instructions are left giving the best means of preventing the disease spreading to other inmates of the house, also details about the disinfection of the room, hands, &c.
- (2) Enquiries are made as to the source of infection, such as previous cases, milk supply, &c.
- (3) Other children in the house are excluded from school.
- (4) Outwork is prohibited.
- (5) Disinfectants are supplied free.
- (6) Disinfection of the premises when infection has ceased.

## Disinfection.

Disinfection has, as usual, been carried out after every case of infectious disease, the method adopted in this district is by fumigation with Formaldehyde gas and spraying of the room as I have described in various reports: this, however, cannot be relied upon to sterilize bulky articles, such as mattresses, &c. The great want, of course, is a steam disinfector for the purifying of things which cannot be boiled, in the absence of which a great deal depends on the good sense and intelligence of the householder.

I have, however, usually been able to get instructions carried out after fully explaining the necessity, and this is shown by the fact that only very occasionally do we have another case occurring in a house after the disinfection. The actual disinfection is carried out by Hudson under the supervision of the Sanitary Inspector, and I have again to report that I consider the work has been done with care and attention to detail.

## Isolation Hospital.

I understand that this important subject will have to be discussed and settled in the near future, as we shall be compelled to make some provision for ourselves for the isolation of infectious diseases. So far, as you are aware, we have had an agreement with the Basford Rural District Council for the isolation of cases : this arrangement has worked well, but it would of course be advantageous in many ways for us to be independent, as I do not think we have any guarantee that we can always rely on obtaining a bed. I have no fault whatever to find with the way in which the Hospital Authorities have treated us, in fact, Dr. Wray has gone out of his way to oblige me in more than one instance, notably when there was a very serious case of Diphtheria which needed an immediate operation, he very kindly ordered an extra bed to be put up, also in the case of the Belgian refugee the same thing happened. I do think, however, that it would be a great convenience to all concerned if we could have a joint hospital, on similar lines to the Rushcliffe Hospital, of course the expense would be greater than it is now, but there is no reason why patients should not contribute something. I presume that the Districts concerned would share according to their rateable value or population as regards the establishment charges, and that each District would pay for its own patients.

The question of the isolation of infectious diseases has always been a difficult question in small Districts like this, combination with similar Districts would tend to greater efficiency and economy than in trying to support a very small Hospital for ourselves.

## Scavenging.

In my last yearly report I had to give a bad account of this important sanitary work. I am glad to say that, during this year under new contractors, the work has been carried on more systematically and regularly.

The middens that I have inspected have all been thoroughly done and with the least possible inconvenience and annoyance to the householders. There were a few complaints at the beginning of the year, but these were probably due to the slackness of the previous contractor. It is satisfactory to note that we are gradually reducing the number of the middens in the District by converting them into water-closets, and a Sanitary Authority should never rest content till its District is free from this antiquated and obnoxious system.



The conversions during the year were:—

Privies with fixed receptables to fresh water closets	71
Privies with movable receptables to fresh water closets	2

The present condition is as follows:—

Number of privies with fixed receptacles	...	1119
"                    "                    movable receptacles	...	12
Number of fresh water closets	...	899
"                    waste                    "	...	355

### Nuisances.

There were a few about the scavenging which I have already mentioned.

I was asked to inspect and report on the condition of a pond on Mapperley Plains: I found it in a very offensive state and a great annoyance to the neighbours, and I had no hesitation in condemning it. After some little delay it was filled in.

### Overcrowding.

One instance only came under my notice during the year: it was a case in which a mother and six children all slept in one bed!

The excuse given was that the father had been doing very badly at work and that they had not the necessary means of furnishing another room. At a subsequent visit I found the same state of affairs, but was then told that the man was going to enlist and that they would then be better off. They are careless, ignorant and improvident people, and it is difficult to make any impression.

### The Arnot Hill Auxiliary Military Hospital.

The Council generously lent Arnot Hill House to the Red Cross Authorities for the wounded soldiers. It was intended at first to use it as a Convalescent Home, but when it was equipped it was thought that it was so eminently suited for a hospital, that it was offered to the War Office for that purpose. After the usual inspection by the War Office Authorities it was accepted by them and was attached to the Leicester division, but was afterwards lent to the Nottingham General Hospital, so that in addition to patients direct from abroad we have also had a few transferred from that hospital.

Sir Charles Seely is generously defraying a considerable portion of the expenses. The equipment, organization and management of the hospital are thoroughly satisfactory in every way owing to the untiring energies of the Commandant, the Hon. Mrs. Birkin. There are 30 beds available and the staff consists of three trained nurses assisted by the nurses and orderlies of our local Red Cross detachment, who have willingly given up much time in the performance of their duties. The patients without exception have expressed their gratitude for the kindness and attention they have received at Arnot Hill, and all seem genuinely sorry to leave.

### The Belgian Refugees.

We are supporting three houses in the District for the Refugees :—

Redhill	...	...	3 men,	3 women.
St. Albans Road	...	6	„ 2	„ 2 children.
Mapperley Plains	...	4	„ 1	woman.

At the time of writing this Report the Mapperley House is empty, owing partly to some of the men having gone to work elsewhere and partly to the discharge of the others who could not agree amongst themselves.

I have inspected the premises at various times and had no particular fault to find with the way they were kept. I understand that, with the exception of the little disturbance mentioned above, things have gone smoothly and that these unfortunate people have been made as comfortable and as happy as possible under the circumstances. There have been a few cases of sickness amongst them, but none of a serious nature. One of the children, as I mentioned before, was sent to the Sanatorium suffering from Scarlet Fever. They have always appeared grateful for all that has been done for them.

### Cowsheds.

These have been inspected by the Sanitary Inspector and myself during the year. Speaking generally, they are in a far better condition than formerly : much has been done during the last three or four years to get them into a sanitary state, and the importance of the subject justified the measures taken.

There are 30 cow keepers and 30 retailers of milk, who fetch the milk direct from the seller and deliver it immediately to the consumer, this is an advantage as it does away with the storage of milk in a shop

or dairy thus lessening the chance of contamination. Whilst so much has been done for the cowsheds, nothing has been done to prove that the cows themselves are in a healthy condition. Your Sanitary Inspector and myself are not experts in veterinary science, and cannot be expected to detect a slight case of Tuberculosis, I would, therefore, ask you again to consider the advisability of appointing a veterinary surgeon to examine all the cows in the District periodically, say twice a year, for the detection of Tuberculosis.

When one remembers that Tuberculosis in cattle is exactly the same disease that exists in man, and that it can be communicated to human beings by infected milk, it makes us realise the great importance of the subject: it seems rather ridiculous to be taking all the steps that are being taken for the prevention and cure of Tuberculosis, without first being quite sure that the future generation is not being fed on tubercle infected milk.

### **Slaughter Houses.**

Systematic inspections of these have been made by the Sanitary Inspector and myself during the year. There are eight licensed. They were, generally speaking, in a good condition, although two required limewashing, which, at our request, was shortly afterwards done. The yard of one is now kept in a much more cleanly state than formerly, though the manure pit at the time of inspection had not been emptied that week although the understanding was that it was to be done weekly: I was assured, however, that the omission was accidental and would not occur again: I believe it has been done with tolerable regularity since. At Mr. Starbuck's (Daybrook) request your Sanitary Inspector and myself examined a carcase, which, with the exception of the hind quarters, we unhesitatingly condemned as there was no doubt about its being Tuberculous. I think a word of commendation is due to this butcher as he had bought this beast, which was apparently a fine looking animal, in good faith, and he suffered considerable financial loss by his integrity.

### **Housing, Town Planning Act, 1909.**

The Sanitary Inspector and myself have systematically inspected houses throughout the year, and full details of the conditions found are taken at the time of inspection, which are afterwards transferred to the official records together with our recommendations. These suggestions are considered by the Housing Committee, who take it in turn to



visit the properties and pass their opinion as to whether the recommendations are reasonable: in the majority of cases their opinion coincides with ours.

As time goes on the type of the property inspected improves, as naturally we took the worst in the earlier years of the Act, in fact, in 15 instances there was nothing needed doing at all.

In a large proportion of cases our recommendations concerned only the midden privies, which we have almost without exception condemned, and the yard paving which was, in a good many instances, either defective or absent altogether. In other properties the usual defects were found, viz.—dampness, due to the want of a damp course or caused by a defective roof, the absence of sinks and dilapidated floors.

Twenty-four demolition orders were made during the year, none of these have yet been executed, but instructions for tenders have been issued and their consideration deferred for a time. I trust the demolition of these houses will eventually take place, they may not all be dangerous or even a nuisance, yet they are unsightly and useless, and their absence would improve the appearance of the place and afford more light and ventilation to surrounding houses: moreover it is not good policy for an authority to make an order and not insist on its being obeyed.

Thirty new houses for the working classes were erected during the year. There are a good many empty ones, and there is no lack of suitable accommodation.

The Medical Officer of Health is asked by the Local Government Board to give in tabular form the following information:—

Houses inspected.	Certified as unfit for human habitation.	Number of closing orders recommended by the M.O.H.
159	1	1
Number of closing orders made by the Council.	Number of houses remedied without a closing order.	Number of houses made fit for habitation after closing order.
1	68	0

### Factories, Workshops and Bakehouses.

There are 11 factories, 17 bakehouses and 40 other workshops on the register.

They have all been inspected during the year and, with the exception of the hosiery workshops, were all in a fairly satisfactory condition. So many of the hosiery workshops were not limewashed frequently enough, and a good many of them were in a dirty condition generally, floors unwashed and unswept and the place full of dust. In very few was the Abstract of the Factory and Workshop Act affixed, but inasmuch as there was no suspicion of overcrowding in any of them, this was not so much insisted upon so long as the requests regarding cleanliness were complied with, which were so in the majority of cases after some little delay.

The bakehouses were generally in a good condition, although in six of them limewashing was overdue, it should be done every six months. They all possess registers in which a record has to be kept of the dates of limewashing and the names of all children working in the bakehouse, with the certifying surgeon's certificate of their fitness to do so. There is one underground bakehouse with which no fault could be found.

Twenty-three lists, representing 152 outworkers, have been received from the factories, and in 25 instances homework had to be forbidden on account of infectious disease in the house. On the whole outworkers' premises have improved, but there is still room for improvement in a great number: as I said in my last report the houses are not always clean, but the Health Visitor, Sanitary Inspector and myself, do our best to persuade people to keep them in better condition.

Dr. Handford has kindly supplied me with his Meteorological records for the year which I append to this Report, together with the usual Local Government Board's Tables, and the Report of the Sanitary Inspector.

In conclusion, I desire to express to the Chairman and members of the Council my sincere thanks for the unvarying courtesy and consideration which I have at all times received at their hands.

I am, Gentlemen,

Your obedient servant,

HARVEY FRANCIS, M.D.,

*Medical Officer of Health*

# ARNOLD DISTRICT.

TABLE I.

Vital Statistics of Whole District during 1914 and previous Years.

YEAR.	Popula- tion estimated to Middle of each Year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS.		NETT DEATHS BELONGING TO THE DISTRICT.					
		Un- corrected Number.	Nett	Number.	Rate.	Of Non- resi- dents regis- tered in the District	Of Resi- dents not regis- tered in the District	Under 1 Year of Age.		At all Ages.			
								Number.	Rate.	Number.	Rate per 1,000 Nett Births.	Number.	Rate.
1909	10,755	320	...	29.75	157	14.59	...	12	51	159	169	15.71	
1910	10,953	275	...	25.1	125	11.41	...	9	38	138	134	12.23	
1911	11,207	286	288	25.69	118	10.52	1	14	40	138	131	11.68	
1912	11,646	286	289	24.81	120	10.3	2	14	26	89	132	11.33	
1913	11,839	278	278	23.48	139	11.74	0	15	31	111	154	13.0	
1914	11,754	293	293	24.92	146	12.42	0	10	36	124	156	13.27	

Area of District in acres (land and inland water)	4,612.	Total population at all ages	...	11,147	} At Census of 1911.
		Number of inhabited houses	...	2,463	
		Average number of persons per house	...	4.5	

## ARNOLD DISTRICT.

TABLE II.

Cases of Infectious Disease notified during the Year 1914

NOTIFIABLE DISEASE	NO. OF CASES NOTIFIED								TOTAL CASES REMOVED TO HOSPITAL
	At all Ages	At Ages—Years							
		Under 1	1 to 5	5 to 15	15 to 25	25 to 45	45 to 65	65 and upwards	
Small-pox	...	...	...	...	...	...	...	...	
Cholera (C)	...	...	...	...	...	...	...	...	
Plague (P)	...	...	...	...	...	...	...	...	
Diphtheria (including Membranous Group)	7	6	1	...	...	...	...	2	
Erysipelas	7	...	1	1	1	3	1	...	
Scarlet Fever	205	39	134	27	5	...	...	2	
Typhus Fever	...	...	...	...	...	...	...	...	
Enteric Fever	...	...	...	...	...	...	...	...	
Relapsing Fever (R)	1	...	...	...	1	...	...	...	
Continued Fever (C)	...	...	...	...	...	...	...	...	
Puerperal Fever	1	...	...	1	...	...	...	...	
Polionymyelitis	...	...	...	...	...	...	...	...	
Ophthalmia	...	...	...	...	...	...	...	...	
Neonatorum	1	...	...	...	...	...	...	...	
Pulmonary	...	...	...	...	...	...	...	...	
Tuberculosis	14	...	...	7	6	1	...	2	
Other forms of Tuberculosis	2	1	1	...	...	...	...	...	
Totals ...	238	1	46	137	36	13	4	1	
								6	

Isolation Hospital } Hucknall Torkard (Small-Pox only).  
 or Hospitals } Basford Sanatorium (Scarlet Fever, Diphtheria, Enteric Fever).  
 Sanatoria, etc. } Ransom Sanatorium (Pulmonary Tuberculosis).

## ARNOLD DISTRICT.

TABLE III.

Causes of, and ages at Death during Year 1914.

CAUSE OF DEATH	NETT DEATHS AT THE SUBJOINED AGES OF "RESIDENTS," WHETHER OCCURRING WITHIN OR WITHOUT THE DISTRICT.									TOTAL DEATHS WHETHER OF 'RESIDENTS' OR 'NON-RESIDENTS' IN INSTITUTIONS IN THE DISTRICT
	All Ages	Under 1	1 and under 2	2 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and upwards	
All Causes—										
Certified .. ..	156	36	4	7	6	6	26	30	41	..
Uncertified .. ..	..	..	..	..	..	..	..	..	..	..
Enteric Fever .. ..	1	..	..	..	..	1	..	..	..	..
Small-Pox .. ..	..	..	..	..	..	..	..	..	..	..
Measles .. ..	3	1	..	2	..	..	..	..	..	..
Scarlet Fever .. ..	4	..	..	2	1	..	1	..	..	..
Whooping Cough .. ..	..	..	..	..	..	..	..	..	..	..
Diphtheria .. ..	..	..	..	..	..	..	..	..	..	..
Influenza .. ..	1	..	..	..	..	..	..	1	..	..
Erysipelas .. ..	..	..	..	..	..	..	..	..	1	..
Phthisis (Pulmonary Tuberculosis) .. ..	14	..	..	..	1	3	8	2	..	..
Tuberculous Meningitis .. ..	2	2	..	..	..	..	..	..	..	..
Other Tuberculous Diseases .. ..	3	..	..	1	1	..	1	..	..	..
Cancer, Malignant Disease .. ..	12	..	..	..	..	1	1	6	4	..
Rheumatic Fever .. ..	1	..	..	..	..	..	1	..	..	..
Meningitis .. ..	..	..	..	..	..	..	..	..	..	..
Organic Heart Disease .. ..	12	..	..	..	..	..	4	4	4	..
Bronchitis .. ..	26	8	1	1	..	..	3	2	11	..
Pneumonia (all forms) .. ..	8	2	1	1	1	..	..	2	1	..
Other Diseases of Respiratory Organs .. ..	6	..	..	..	..	..	1	3	2	..
Diarrhoea & Enteritis .. ..	9	8	..	..	..	..	..	..	1	..
Appendicitis and Typhlitis .. ..	..	..	..	..	..	..	..	..	..	..
Cirrhosis of Liver .. ..	..	..	..	..	..	..	..	..	..	..
Alcoholism .. ..	..	..	..	..	..	..	..	..	..	..
Nephritis & Bright's Disease .. ..	3	1	..	..	..	..	1	1	..	..
Puerperal Fever .. ..	1	..	..	..	..	1	..	..	..	..
Other Accidents and Diseases of Pregnancy & Parturition .. ..	3	..	..	..	..	..	2	1	..	..
Congenital Debility and Malformation, including Premature Birth .. ..	11	11	..	..	..	..	..	..	..	..
Violent Deaths, excluding Suicide .. ..	3	..	..	..	1	..	..	2	..	..
Suicide .. ..	1	..	..	..	..	..	..	1	..	..
Other Defined Diseases .. ..	31	2	2	..	1	..	3	5	18	..
Diseases ill-defined or unknown .. ..	1	1	..	..	..	..	..	..	..	..
	156	36	4	7	6	6	26	30	41	..





## ARNOLD DISTRICT.

*Annual Report of the Medical Officer of Health for the year 1914 on the administration of the Factory and Workshop Act, 1901, in connection with Factories, Workshops, Workplaces and Homework.*

## 1.—INSPECTION.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises (1)	Number of		
	Inspections (2)	Written Notices (3)	Prosecutions (4)
<b>Factories</b> (including Factory Laundries) .. .. .	28	..	..
<b>Workshops</b> (including Workshop Laundries) .. .. .	131	..	..
<b>Workplaces</b> (other than the Outworkers' premises included in Part 3 of this Report) .. .. .	..	..	..
Total .. .. .	159	..	..

## 2.—DEFECTS FOUND.

Particulars.  (1)	No. of Defects.			Number of Prosecutions  (5)
	Found  (2)	Remedied  (3)	Referred to H.M. Inspector (4)	
<i>Nuisances under the Public Health Acts :—</i>				
Want of cleanliness .. .. .	8	8	..	..
Want of ventilation .. .. .	3	3	..	..
Other nuisances .. .. .	..	..	..	..
Sanitary accommodation { insufficient .. .. .	..	..	..	..
{ unsuitable or defective .. .. .	..	..	..	..
{ not separate for sexes .. .. .	..	..	..	..
<i>Offences under the Factory and Workshop Acts :—</i>				
Breach of special requirements for bakehouses (ss. 97 to 100) .. .. .	6	6	..	..
Total .. .. .	17	17	..	..

### 3.—HOME WORK.

NATURE OF WORK	OUTWORKERS' LISTS, SECTION 107										OUTWORK IN UNWHOLE SOME PREMISES, SECTION 108			OUTWORK IN INFECTED PREMISES, SECTIONS 109, 110								
	Lists received from Employers							Prosecutions			Instances	Notices served	Prosecutions	Instances	Orders made (S. 110)	Prosecutions (Sections 109, 110)						
	Sending twice in the year		Sending once in the year		Lists	Con- tractors	Work- men	(3)	(4)	(5)							(6)	(7)	(8)	(9) enpliers as to keeping or sending lists.	(10) Failing to keep or permit inspection of lists	(11) Failing to send lists
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)							
Wearing apparel—																						
(1) making, &c.	4	10	..	8	43	68	..	..	..	..	..	..	25	25	..	..						
(2) cleaning and washing	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..						
Lace, lace curtains and nets	8	..	14	3	..	17	..	..	..	..	..	..	..	..	..	..						
Total .. ..	12	10	14	11	43	85	..	..	..	..	..	..	25	25	..	..						



## 4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year. (1)	Num- ber. (2)
Bakehouses .. .. .	17
Hosiery, Joiners, Shoe Repairers, &c. .. .	40
Total number of workshops on Register .. .	57

## 5.—OTHER MATTERS.

Class. (1)	Num- ber. (2)
Matters notified to H.M. Inspector of Factories :—	
Failure to affix Abstract of the Factory and Workshop Act (s. 133) .. .	..
Action taken in matters referred by { H.M. Inspector as remediable under { the Public Health Acts, but not under { the Factory and Workshop Act (s. 5) {	Notified by H.M. Inspector .. .. Reports (of action taken) sent to H.M. Inspector .. ..
Other .. .. .	..
Underground Bakehouses (s. 101) :—	
Certificates granted during the year .. .	..
In use at the end of the year .. .	1

March, 1915.

Harvey Francis,  
Medical Officer of Health.

# METEOROLOGICAL RECORDS, at Elmfield, Southwell, by Dr. Handford, for the year 1914.

Longitude 0° 56' 54" W.

Latitude 53° 4' 42" N.

32

MONTH.	TEMPERATURE.						FROSTS.		RELATIVE HUMIDITY at 8 a.m.	RAINFALL.			
	Maxi- mum.	Date.	Mini- mum.	Date.	Mean.	Differ- ence from Average.	Frost in Screen.	On Grass.		Total Depth.	Greatest Fall in 24 Hours.		Number of Rainy Days.
											Inches.	Date.	
January	54.2	31st	17.5	1st	37.4	+0.9	15	26	90.3	1.290	0.455	10th	18
February	56.4	1st	26.3	27th	42.7	+3.7	8	20	81.2	1.175	0.205	21st	17
March	59.7	31st	27.9	28th	42.4	+2.2	9	18	84.6	2.365	0.375	11th	22
April	73.1	22nd	30.2	12th	48.6	+4.0	4	16	72.5	0.980	0.290	4th	9
May	74.8	18th	27.3	2nd	50.9	+0.1	2	7	76.4	1.700	0.520	22nd	14
June	85.6	30th	36.3	3rd	58.1	+1.3	0	0	75.8	2.155	0.875	9th	7
July	83.6	1st	46.9	8th	61.8	+1.8	0	0	79.5	2.400	0.550	1st	15
August	79.4	23rd	42.3	18th	60.8	+1.4	0	0	84.7	2.140	0.705	24th	12
September	79.1	3rd	30.1	30th	55.0	+0.2	3	5	82.9	0.645	0.290	12th	7
October	65.2	3rd	30.7	28th	49.3	+2.5	2	4	91.9	2.175	0.790	25th	14
November	57.9	30th	26.6	21st	42.9	+0.3	11	18	89.8	2.955	0.505	13th	21
December	53.1	2nd	24.0	25th	38.8	+1.0	13	24	90.7	4.590	0.620	28th	28
							67	138		24.570	0.875	June 9th	184

Maximum Temperature, 85.6, on June 30th. Minimum Temperature, 17.5, on January 1st.

Total Rainfall, 24.570 inches.

Difference from Average, - 1.43. Mean Temperature for the Year, 49.058°.

Total Rainfall, taken by Monthly Rain Gauge, 24.570 inches. Diameter of Funnel, 5 in. Height of Top (Above Sea Level, 132.27 ft. Above Ground, 1 ft. 0 in.)

# Arnold Urban District Council.

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## SANITARY INSPECTOR'S REPORT

For the Year ending December 31st, 1914.

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*To the Chairman and Members of the Arnold Urban District Council.*

GENTLEMEN,

I beg to submit my Report of work done during the year 1914. The past year has been a memorable one for Arnold in several ways. The extension of the Nottingham tramway system from Sherwood to Spout Lane, Arnold; the purchase of Arnot Hill House and Grounds as a Public Park for the inhabitants of Arnold, and the opening of the land known as the Meadow for building purposes have all created great interest. It is hoped that much greater and easier travelling facilities to and from the county town will prove of great benefit to the district.

### Sewerage.

The continued depression in the building trades has had a prejudicial effect upon the opening out of land for building purposes. Only two new sewers have been constructed, viz.: in Charles Street and George Street.

The whole sewerage system has worked exceedingly well, only two sewers, viz.:—Brookfield Road and Cross Street, have given any trouble. This excellency is greatly due to constant supervision and the natural contour of the land being favourable to gravitation.

During the year only 30 houses have been connected up to the sewers, and there are only two houses draining into cesspools that can be connected up to the sewerage system.

The nine houses in Woodthorpe Drive, near the city boundary, are not yet connected to the sewer. The occupiers of houses in Villiers Road complain occasionally of the nuisance arising from the overflow and emptying of the cesspools. The Council should extend for 110 yards the sewer running through the gardens at the back of Villiers Road to abate the nuisance.

## **Scavenging.**

During the year the Council terminated their Contract with the Scavenging Contractor.

The new Contractors under more stringent clauses in the Contract have satisfactorily carried out what they undertook to do.

The dry ash and rubbish has been used to form cart roads on farms and the midden contents disposed of to farmers for manuring the land.

The Contractors undertook to find a tip for all house refuse, but they are finding great difficulty in disposing of it. Unless the Council acquire suitable land on which to deposit the refuse, it will be imperative in the very near future to provide a Destructor to burn it and use the Clinker in forming roads and footpaths.

Seventy-one midden privies and two tubs have been converted into w.c.'s serving 102 houses, a considerable increase over any other previous year.

The number of w.c.'s and slop closets in the Parish, exclusive of those in factories, schools, &c., is 1,253.

## **Cowsheds and Dairies.**

The whole of the cowsheds have been visited at least twice during the year. The cow-keepers generally take an interest in keeping their animals and premises in a cleanly condition, but there is still room for improvement. The cleansing of the Cows udders is not carried out as one would like, but prejudice is gradually dying out against the cleansing and washing of the parts likely to contaminate the milk.

There are 30 cow-keepers and 30 purveyors of milk.

There are no dairies or milk shops.

## **Slaughter Houses.**

The eight slaughter houses have been frequently inspected. The premises generally are in a first-rate condition, are cleansed every time slaughtering takes place, and the walls are frequently lime-washed.

No case of selling diseased meat or stale fish was reported during the year. One license-holder submitted the carcase of a heifer slaughtered on his premises. The Medical Officer of Health and myself inspected the carcase which was found to be slightly infected with Tuberculosis, and a certificate was issued to the effect that a part of the carcase only was unfit for human consumption. The other parts were disposed of in the same way as offal.

## **Bakehouses.**

The 19 Bakehouses, 17 of which are occupied, have been properly cleansed and lime-washed. The twice-a-year lime-washing is insufficient to keep a bakehouse clean where the old style of oven is in use.

No notices have been received from the factory inspector in respect of bakehouses.

## **Outworkers.**

Twenty-seven lists of outworkers have been received containing 107 names. Twenty-four addresses were of outworkers residing in adjoining districts and to which the usual notice was forwarded. Forty-five addresses came from other Local Authorities, but no lists were received from local firms twice during the year.

Owing to the lace trade having been in a very bad condition the number of outworkers has been greatly reduced. The Insurance Act also tends to keep the work in fewer hands than in years past.

## **Housing and Town Planning Act.**

In conjunction with the Medical Officer of Health 159 houses have been inspected and reported to the Housing Committee during the year, making a total of 597 since the Committee was formed. A Closing order in respect of one of these was made and the house is not occupied.

Sixty-eight houses have been put in order and the notices complied with. At 15 houses nothing was required to be done, and the remainder are still in the same condition.

In nine instances where the owners have failed to execute the repairs, the Committee have given instructions for Closing orders to be served.

Demolition notices have been served in respect of 25 houses, and I was instructed to obtain tenders for pulling them down, but the Council deferred their consideration until the January meeting.

Demolition notices were ordered to be served upon the owners of five blocks of property, comprising 17 houses.

### General.

The previous year (1913) the number of cases of Scarlet Fever was above the average in this and the adjoining parishes. This year it was thought the epidemic had died out, but the number of cases has been greater. Many of the patients being above the usual age for infantile diseases. In each case the house has been disinfected with Formaldehyde gas.

In my opinion it is advisable for the Picture Houses to be fumigated occasionally. Although the proprietors take every care to keep the places clean, yet owing to the buildings being constructed to keep out the sunlight, it is almost impossible for them to receive the extra attention required.

I have the honour to remain,

Your obedient servant,

R. E. CLARKE,

*Inspector of Nuisances.*